

Work Order ID 100502

100502

Page 1

April-22-13 1:42:36 PM

Item ID: 646.3314

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Blade

Start Date: 4/22/13

Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/22/13

Req'd Qty: 10.00

10

Customer:

Reference:

Run Start

NR1

Approvals:

Process Plan: MJS

Date: 13-04-25

Tooling:

Date:

Stop

NR2

QC:

Date:

SPC (Y/N):

Date:

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

Draw Nbr

Revision Nbr

646.3300

N/C

100

0.00

100

BAND SAW

Bandsaw

Memo

0.00

Jeaspa Bandsaw

Cut Blank at 5.050"

13-04-26

10

2

100502(10)

0.00

VERTICAL MACHINING #1

HAAS 1

Memo

0.00

HAAS CNC vertical machine #1

1-Machine per folio FB147

DWG REV: N/C

FOLIO REV: AA

10

DAS
25
13-04-26

2- deburr and break all sharp edges except otherwise noted

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Work Order ID 100502

100502

Page 2

April-22-13 1:42:36 PM

Item ID: 646.3314

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Blade

Start Date: 4/22/13 Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/22/13 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 120 | QC2- Inspect parts off machine FAI/FAIB | 0.00 | | | | | | | |
| *120* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |
| 130 | QC8- Inspect parts - second check | 0.00 | | | | | | | |
| *130* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |
| 140 | Outsource process - Heat Treat | 0.00 | | | | | | | |
| *140* | | | | | | | | | |
| Outsource1 | Memo | 0.00 | | | | | | | |
| Outsource process - Heat Treat | HEAT TREAT AS PER DWG, SEE NOTE #3 | | | | | | | | |
| | ISSUE P/O: 19789 | | | | | | | | |

DAS
04
9-89
13-52

13.5.5

10 4

DAS
04
9-89

C2 13/05/06 10

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

Work Order ID 100502

100502

Page 3

April-22-13 1:42:36 PM

Item ID: 646.3314 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Blade
 Start Date: 4/22/13 Start Qty: 10.00 *10* Cust Item ID:
 Required Date: 4/22/13 Req'd Qty: 10.00 *10* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 150 | Receive & Inspect for Damage & Mat'l Certs | 0.00 | | | | | | | |
| *150* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | | | | | | | | | |
| 155 | QC5- Inspect part completeness to step on W/O | 0.00 | | | | | | | |
| *155* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |
| 160 | Spray Painting per QSI005 4.2 | 0.00 | | | | | | | |
| *160* | | | | | | | | | |
| SprayPaint | Memo | 0.00 | | | | | | | |
| Spray Painting | PRIME AS PER DWG, SEE NOTE #4 | | | | | | | | |
| | PRIMER BATCH: 125452 | | | | | | | | |

43/0/24 (10)

10

10 0 0 A9 13-6-1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabelled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Work Order ID 100502

100502

Page 4

April-22-13 1:42:36 PM

Item ID: 646.3314

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Blade

Start Date: 4/22/13

Start Qty: 10.00

10

Cust Item ID:

Required Date: 4/22/13

Req'd Qty: 10.00

10

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

170

QC14- Inspect Spray Paint

0.00

DAS
16
9-8-83

13/04/05

(10)

170

QC

Memo

0.00

Quality Control

180

Identify as per dwg & Stock Location: ST536

0.00

180

Packaging

Memo

0.00

10X

M.H. 16-06-6

Packaging

IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV

SP

190

QC21- Final Inspection - Work Order Release

0.00

190

QC

Memo

0.00

13/06/10

Quality Control

11/13-06-7

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabelled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
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| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Picklist Print

April-22-13 1:42:35 PM

Page 1

Work Order ID: 100502

Parent Item: 646.3314

Parent Item Name: Blade

Start Date: 4/22/13

Required Date: 4/22/13

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV:A NEW ISSUE 12/11/07 JFS VERIFY BY: JLM

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| MSTEEL-A2- B0.500X1.250 AISI A2 TOOL STEEL BAR, 0.500 X 1.250 | | Purchased | No | | | 100 | f | 114.3500 | 0.421 | 4.4315789 | 4.300' | 4-13-04-26 | |

Location

Loc Qty

Loc Code

MAT009

114.3500001

123250

0.0000001

125350 /

114.35

4.300'

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|--|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

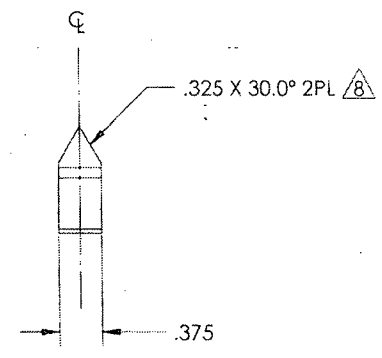
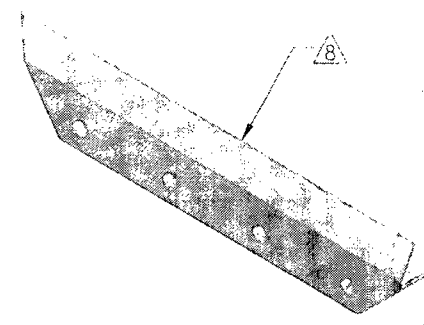
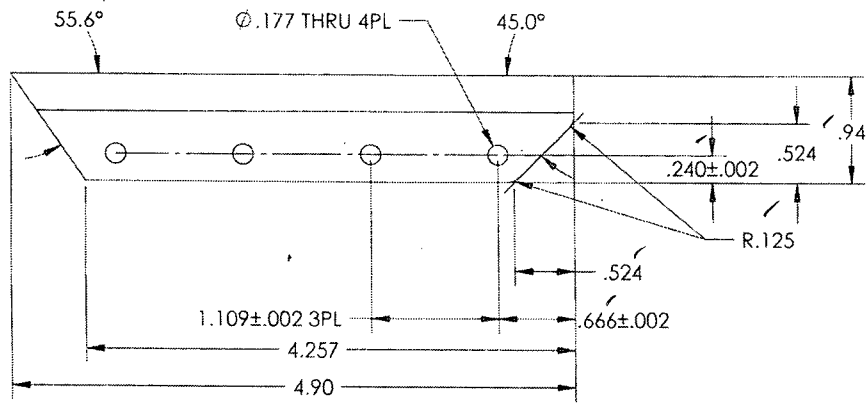
FAULT CATEGORY

| | | |
|---|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
|---|---|---|

| | |
|--|---|
| <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|

INCO
SUB

100502 MJS
1304-25



646.3314

| | | | |
|---|--|----------------------------|-------------|
| ORIGINAL DATE 10/01/01 | | DESIGNED BY J. H. H. H. | |
| DRAWN BY A. H. H. H. | | P. H. H. H. | |
| CHECKED BY P. H. H. H. | | DATE 10/01/01 | |
| UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ±.01 ANGLES ±.5° | | SCALE NONE | REV 14/C |
| SHEET 1 | | PART NO. 646.3300 | |
| DRAWING NO. 646.3300 | | SHEET 6 OF 6 | |

APICAL INDUSTRIES
2608 TEMPLE HEIGHTS DR.
OCEANSIDE, CA 92056-3512 (760) 724-5300
UPPER CUTTER ASSY

| | |
|---|------------------------------|
| DART AEROSPACE LTD | Work Order: 100502 |
| Description: upper cutter | Part Number: 646-3314 |
| Inspection Dwg: 646-3300 Rev: N/C | Page 1 of 1 |

FIRST ARTICLE INSPECTION CHECKLIST

| Drawing Dimension | Tolerance | Actual Dimension | Accept | Reject | Method of Inspection | Comments |
|-------------------|-----------------|------------------|--------|--------|----------------------|----------|
| 55.6° | + .5° | 55.6 | ✓ | | protractor | |
| Ø.171 | + .005 / - .001 | .178 | ✓ | | pin | |
| 45° | + .5° | 45° | ✓ | | protractor | |
| .94 | + .010 | .937 | ✓ | | Vern | SL-10 |
| .524 | + .005 | .524 | ✓ | | " | |
| .240 | + .002 | .240 | ✓ | | " | |
| R.125 | + .005 | .125 | ✓ | | " | |
| .524 | + .005 | .524 | ✓ | | " | |
| .666 | + .002 | .666 | ✓ | | H-G | |
| 4.90 | + .010 | 4.895 | ✓ | | Vern | SL-10 |
| 4.257 | + .005 | 4.257 | ✓ | | " | |
| 1.109 | + .002 | 1.109 | ✓ | | " | |
| .325X30° | + .005 / + .5° | .325X30° | ✓ | | " | |
| .375 | + .005 | .374 | ✓ | | " | |
| | | | | | | |
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| | | |
|------------------------|--------------------------------|------------------------------|
| Measured by: JL | Audited by: DAS 04 9-83 | Preliminary Approval: |
| Date: 13-05-02 | Date: 13.5.02 | Date: |

| Rev | Date | Change | Revised by | Approved |
|-----|----------|----------------------------|------------|----------|
| E | 10.04.14 | Added preliminary approval | KJ | |

10.04.15



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO19799

Purchase Order Date 5/06/13

PO Print Date 5/06/13

Page Number 1 of 1

Order From :

VC-MET004

METCOR INC.
560 BOUL. ARTHUR SAUVE
SAINT-EUSTACHE, QC J7R 5A8
CA

Contact Name

Vendor Phone

450 473 1884

Vendor Fax

450 491 5498

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
05/13/507

| Line Nbr | Reference Revision ID Vendor Part Number | Description/ Mfg ID | Req Date/ Taxable | Req Qty/ Unit of Measure | Ship Method | Unit Price | Extended Price |
|----------|--|------------------------|----------------------|-----------------------------|------------------|------------|-------------------|
| 1 | 100499 | 646.3315 BLADE | 5/17/13 Yes | 10.00 | FedEx PI collect | \$0.0000 | \$0.00 |

Special Inst: FINISH: HEAT TREAT TO 58-62 RC
ROCKWELL HARDNESS

PART ARE MADE FROM AISI A2 TOOL
STEEL

PLEASE NOTE: DETAIL C OC REQUIRED

| | | | | | | | |
|---|--------|----------------|----------------|-------|------------------|----------|--------|
| 2 | 100502 | 646.3314 BLADE | 5/17/13 Yes | 10.00 | FedEx PI collect | \$0.0000 | \$0.00 |
|---|--------|----------------|----------------|-------|------------------|----------|--------|

Special Inst: FINISH: HEAT TREAT TO 58-62 RC
ROCKWELL HARDNESS

PART ARE MADE FROM AISI A2 TOOL
STEEL

PLEASE NOTE: DETAIL C OC REQUIRED

PO Total:

\$0.00

Change Nbr: 1

Change Date: 5/06/13

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required **YES** NO

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC J7R 5A8
Tel: 450-473-1884 / Fax: 450-491-5498

Reçu de livraison

Delivery Receipt

| BON DE TRAVAIL | EXPÉDITEUR | BON D'EXPÉDITION |
|----------------|------------|------------------|
| Order | Shipper ID | Shipper |
| 186158 | 1 | 71609 |

EXPÉDITION COMPLÈTE / Shipped Complete

CLIENT /Customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
Ph: 613-632-5200
Fax: 613-632-1053

LIVRÉ À /Shipped To

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
Ph: 613-632-5200
Fax: 613-632-1053

| COMMANDE DU CLIENT | BON DE LIVRAISON DU CLIENT | TYPE DE MATÉRIEL | DATE DE LA COMMANDE | TRANSPORTEUR |
|--------------------|----------------------------|------------------|---------------------|--------------|
| Customer PO | Customer Shipper No. | Material Type | Order Date | Carrier |
| PO19799 | | A2 | 2013/5/7 | FEDEX |

| QUANTITÉ | No. PIÈCE / | NOM DE LA PIÈCE / | DESCRIPTION DE LA PIÈCE | POIDS |
|----------|-------------|-------------------|-------------------------|--------|
| Quantity | Part No. | Part Name | Part Description | Weight |

20 646.3315 5,
(10) BLADE
REF: 100499
MATÉRIEL: AISI A2 TOOL STEEL
(10) 646.3314 BLADE
REF: 100502
MATERIAL AISI A2 TOOL STEEL

CONTENANT: 1 BOÎTE DE CARTON

| TYPE DE CONTENEUR | # DE CONTENEURS | COMMENTAIRES CONTENEUR |
|-------------------|-----------------|------------------------|
| Container Type | # Of Containers | Container Comments |
| BOITE DE CARTON | 1 | |

CERTIFICAT

| | |
|------------------------|--|
| EMPAQUETAGE Packing | |
|------------------------|--|

QUANTITÉ EXPÉDIÉE / Quantity Shipped : 20
POIDS EXPÉDIÉ / Weight Shipped : 5,00
QUANTITÉ RESTANTE / Quantity Remaining : 0
POIDS RESTANT / Weight Remaining : 0,00

CERTIFICAT

| | |
|--------------------------------------|------|
| QUANTITÉ EXPÉDIÉE /Quantity Shipped: | 20 |
| POIDS EXPÉDIÉ / Weight Shipped : | 5,00 |

Signature:

Date:

EXPÉDIÉ LE / Shipped On : 2013/05/16



Metcor Inc.

560, boul. Arthur-Sauvé, St-Eustache (Québec) J7R 5A8
Tél. 450 473-1884
Télécopieur/Fax administration 450 491-5498
Télécopieur/Fax production 450 491-6454

Page 1 / 1

Certificat de Conformité Certificate of Compliance

| BON DE TRAVAIL order | CHARGEMENT load |
|-------------------------|--------------------|
| 186158 | 1 |

CLIENT / customer 215

DART AEROSPACE

1270 ABERDEEN

HAWKESBURY

ON K8A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE

1270 ABERDEEN

HAWKESBURY

ON K8A 1K7

| COMMANDE DU CLIENT customer po | BON DE LIVRAISON DU CLIENT customer shipper no. | MATÉRIEL material | CODE DE TRAITEMENT mat'l heat code | NUMÉRO DE LOT lot number |
|-----------------------------------|--|----------------------|---------------------------------------|-----------------------------|
| PO 18799 | | A2 | | |

SPECIFICATIONS DU PROCÉDÉ

processing specifications

VAC HARDEN

HARDEN AND TEMPER

| EXIGENCE / requirement | SPECIFICATIONS / specified | TESTS EXÉCUTÉS / performed | RÉSULTATS DE TESTS / results |
|------------------------|----------------------------|----------------------------|------------------------------|
| HARDNESS | 58 - 62 HRC | 5 | 60.0 - 61.0 HRC |

| QUANTITÉ quantity | POIDS weight | DESCRIPTION DES PIÈCES parts description |
|----------------------|-----------------|--|
| 20 | 5 | 848.3315 (10) BLADE REF: 100499 MATÉRIEL: AISI A2 TOOL STEEL (10) 848.3314 BLADE RÉF. 100502 MATERIAL AISI A2 TOOL STEEL CONTENANT: 1 BOÎTE DE CARTON |

COMMENTAIRES / comments

CERTIFIÉ par / Certified by:



DATE: 2013-05-16

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

Certificat de Conformité Détaillé

Detailed Certificate of Compliance

| BON DE TRAVAIL order | CHARGEMENT load |
|-------------------------|--------------------|
| 186158 | 1 |

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

1

| COMMANDE DU CLIENT customer po | BON DE LIVRAISON DU CLIENT customer shipper no. | MATÉRIEL material | CODE DE TRAITEMENT mat'l heat code | NUMÉRO DE LOT lot number |
|-----------------------------------|--|----------------------|---------------------------------------|-----------------------------|
| PO19799 | | A2 | | |

SPÉCIFICATIONS DU PROCÉDÉ

processing specifications

VAC HARDEN

HARDEN AND TEMPER

| EXIGENCE / requirement | SPÉCIFICATIONS / specified | TESTS EXÉCUTÉS / performed | RÉSULTATS DE TESTS / results |
|------------------------|----------------------------|----------------------------|------------------------------|
| HARDNESS | 58 - 62 HRC | 5 | 60.0 - 61.0 HRC |

| QUANTITÉ quantity | POIDS weight | DESCRIPTION DES PIÈCES parts description |
|----------------------|-----------------|--|
| 20 | 5 | 646.3315 (10) BLADE REF: 100499 MATÉRIEL: AISI A2 TOOL STEEL (10) 646.3314 BLADE RÉF. 100502 MATERIAL AISI A2 TOOL STEEL CONTENANT: 1 BOÎTE DE CARTON |

| Operation | Temp. spécifiée Specified Temp | Temps de tremp Spécifié Specified Soak Temp | Atmosphère | Carbone Carbon Potential | Q-Media Q-Temp | Four # Furnace # | Date Départ Start Date | Heure d'entrée Time In | Heure de sortie Time Out | Date Complétée Date complete |
|---------------------|-----------------------------------|--|------------------|--------------------------------|-------------------|---------------------|---------------------------|---------------------------|-----------------------------|---------------------------------|
| 1.00 CONT. INIT. | LAVAGE | | si nécessaire | | | | | | | |
| 2.00 PREPARING | COMPTAGE | | | | | | | | | |
| 3.00 PREHEAT 1 | 1200 | 0:30 | VAC | | | 390 | | | | |
| 4.00 PREHEAT 2 | 1500 | 0:30 | VAC | | | 390 | | | | |
| 5.00 VAC HARDE | 1800 | 1 hrs 30 minutes | VAC | | AZOTE | 390 | | | | |
| 6.00 TEMPER | 400+/-10°F | 2 hrs | air | | | 653 | | | | |

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ

ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

Certificat de Conformité Détaillé

Detailed Certificate of Compliance

| BON DE TRAVAIL order | CHARGEMENT load |
|-------------------------|--------------------|
| 186158 | 1 |

CLIENT / customer 215

DART AEROSPACE

1270 ABERDEEN

HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE

1270 ABERDEEN

HAWKESBURY

ON K6A 1K7

1

| Operation | Temp. spécifiée Specified Temp | Temps de trempe Spécifié Specified Soak Temp | Atmosphere | Carbone Carbon Potential | Q-Media Q-Temp | Four # Furnace # | Date Départ Start Date | Heure d'entrée Time In | Heure de sortie Time Out | Date Complétée Date complete |
|--------------------|-----------------------------------|---|------------|--------------------------------|-------------------|---------------------|---------------------------|---------------------------|-----------------------------|---------------------------------|
| 7.00 TEMPER 2 | 400+/-10°F | 2 hrs | air | | | 653 | | | | |
| 8.00 HARDN INS | | | | | | | | | | |
| 9.00 FINAL INSP | | | | | | | 05-16-2013 | | | 05-16-2013 |

COMMENTAIRES / comments

Le traitement thermique a été fait en utilisant des équipements en conformité avec la spécification demandée.

Toutes les opérations de traitement thermique ont été faites en conformité avec les requis de la spécification demandée et toutes les vérifications et les tests demandés ont été faites et documentés.

Aucun changement ou dérogation n'a été faite par rapport au traitement thermique demandé.

On certifie que le matériel a été fabriqué, échantillonné, testé et inspecté en accord avec les spécifications du matériel et le bon de commande et le matériel rencontre les exigences spécifiés.

All the heat treatment processing performed on this order was accomplished using heat treatment equipment compliant with the requested heat treatment specification.

All the heat treatment operations were accomplished in accordance with the requested/required heat treatment specification and all required verifications test have been performed and documented.

No unauthorized changes or deviations to required heat treatment specifications or procedures have been performed.

We certify that the material was manufactured, sampled, tested and inspected in accordance with the material specification and the purchase order and was found to meet the requirements.

APPROUVÉ par / Approved by:

Isabel Glen

DATE: 2013-05-16



/ Nous certifions que toute l'information comprise sur ce rapport est exacte et conforme aux requis du client./We certify that all the information on this report is exact and in accordance with the order requirements.